Business Entit	у Тур	e (Please select	one									
Sole Proprietorship		Partnership		Limited Liability mpany	Regues	Corporation	Tru	st	Non-Profit Organization		Other	
Business Desi	gnati	on Group (Pleas	e sel	ect all that apply	)							
MBE		WBE		SBE		□PBE			□ VET		OVET	□ESB
Minority Busines Enterprise	88	Women-Owned Business Enterprise		Small Business Enterprise		Physically Challenged Business Enterprise			Veteran Owned Business	Disabled Veteran Owned Business		Emerging Small Business
Number of	Cla	rk County Ne	evac	da Residents	E	mployed:				24		
Corporate/Bus	iness	Fntlty Name	Free	edom House Sob	per	Living						
(include d.b.a.,		10	DB/	A Freedom Beha	vio	ral Health						
Street Address			385	2 Palos Verdes S	St #	<b>#</b> 32		Web	site: WWW.freedomh	nouse	esoberliving.com	1
City, State and Zip Code:  Las Vegas NV 89119  POC Name: Jeff Iverson  Email: Jeff@freedomhouselv.com												
Telephone No: Fax No:												
Nevada Local	Stree	t Address:					1	Web	site:			
(If different fro	m ab	ove)										
City, State and	<b>Z</b> Ip	Code:						Loca	al Fax No:			
I cool Tolombo	an Ne							Loca	al POC Name:			
Local Telephor	16 M	); 						Ema	Email:			
Entities include close corporation	all bu is, for	siness associations eign corporations, l	s orga limite	anized under or go d liability companie	ven s, p	ned by Title 7 of partnerships, limit	the Neva ed partne Title	ada Re erships	evised Statutes, including s, and professional corpo	g but pration	not limited to privals. % Owne	
Silvia Buckley		, an Hame		P	res	sident					lot required for Pui orations/Non-profi	blicly Traded
Jeffrey Iverson						retary					·····	
Gerald Bell					rea	surer						
David Lester				D	ire	ctor						
1. Are any inc	dividu	al members, partne County Water Recl	ers, ov amati yes, p	on District full-time	inv em	volved in the busi iployee(s), or app y employee(s), o	ness enti pointed/el r appoint	ity, a C lected ted/ele	clark County, Departmen official(s)? cted official(s) may not p	t of A		•
sister, grar	idchil		lated	to a Clark County,					c partner, child, parent, into Detention Center or t			
Yes		✓ No (If	yes, p	please complete the	e Di	isclosure of Rela	tionship f	orm or	n Page 2. If no, please p	rint N	/A on Page 2.)	
				information provide ales, leases or exc		nges without the o	complete	d discl	accurate. I also understa osure form. 30 CK(EY	and th	at the Board will n	ot take action on
Signature	nT					Print Name	30-					
Title						Date						

Sole	Partnership	Limited Liability	Corpo	ration	Trust	Non-Profit		Other	
roprietorship	Parmership	Company	Corpor	ation	I IIusi	Organization		Z 4 O III O	
Business Designati	ion Group (Pleas	e select all that app	T						
MBE	<b>₩</b> WBE	SBE	PB			✓ VET		OVET	ESB
Minority Business Enterprise	Women-Owned Business Enterprise	Small Busines Enterprise		Physically Challenged Business Enterprise		Veteran Owned Business		abled Veteran ned Business	Emerging Sma Business
Number of Cla	rk County No	evada Residen	ts Employ	/ed:	49	50			
Corporate/Busines	s Entity Name:	Lisa A. Durette MD	PLLC						
Include d.b.a., if a	oplicable)	Healthy Minds							
Street Address:		526 Tonopah Dr. S	Ste. 160		W	/ebsite: www.healthy	mindsiv	.com	
Las Vegas, NV 891 ty, State and Zip Code:			106						
elephone No: 702-234-2727						ax No:			
		-							
Nevada Local Stree			, v	/ebsite:					
if different from ab	2		- 1.	seel Eau No.					
City, State and Zip		Local Fax No:			0'				
_ocal Telephone N	o:				ocal POC Name: mail:				
inancial interest in the Publicly-traded enti- ownership or financial	e business entity ap ties and non-prot I interest. The disclar	ppearing before the Bo fit organizations sha osure requirement, as as organized under or	eard.  iii list all Co applied to land	rporate I-use ar	Officers as optications, ex	es of individuals holding and Directors in lieu of atends to the applicant a Revised Statutes, includings, and professional of	f disclos and the la	ing the names of andowner(s).	f individuals with
financial interest in the Publicly-traded enti- ownership or financial	e business entity ap ties and non-prot I interest. The disclar	ppearing before the Bo fit organizations sha osure requirement, as as organized under or	eard.  iii list all Co applied to land	rporate I-use ar	Officers as optications, ex	nd Directors in lieu o xtends to the applicant a	f disclos and the la uding but orporatio (i Cor	ing the names of andowner(s). not limited to privins. % Own Not required for Puporations/Non-prof	f individuals with vate corporations, add ublicly Traded
financial interest in the Publicly-traded enti- ownership or financial	e business entity ap ties and non-pro I interest. The discleusiness association relgn corporations,	ppearing before the Bo fit organizations sha osure requirement, as as organized under or	eard.  iii list all Co applied to land	rporate I-use ar	Officers and optications, extending the Nevada ited partners!	nd Directors in lieu o xtends to the applicant a	f disclos and the la uding but orporatio (i	ing the names of andowner(s). not limited to privins. % Own Not required for Puporations/Non-prof	f individuals with vate corporations, add ublicly Traded
Financial interest in the Publicity-traded enti- publicity-traded enti- ownership or financial Entitles include all bi- close corporations, for isa Durette	e business entity ar ties and non-pro' I interest. The discle usiness association reign corporations, Full Name	ppearing before the Bo fit organizations sha osure requirement, as as organized under or	ard.  It list all Co applied to land governed by T nies, partnersh	rporate d-use ap fitle 7 o ips, limi	o Officers as optications, ex- f the Nevada ited partners!	nd Directors in lieu o ktends to the applicant in Revised Statutes, inclu- nips, and professional o	f disclos and the la uding but orporatio (i Corp 100%	ing the names of andowner(s). not limited to privins. % Own Not required for Puporations/Non-prof	f individuals with vate corporations, add ublicly Traded
Publicly-traded enti- ownership or financial Entitles include all bi- close corporations, for  isa Durette  This section is not real.  Are any individual	ties and non-pro i interest. The discle usiness association reign corporations,  Full Name	opearing before the Bo fit organizations sha osure requirement, as as organized under or limited liability compan	ard.  All list all Co applied to land governed by T nies, partnersf  Owner  Owner	rporate d-use ap litle 7 or lips, limi	o Officers as optications, experimental optications, experimental optications. Title	nd Directors in lieu of stends to the applicant of Revised Statutes, includings, and professional of the state of the stat	f disclos and the la uding but orporatio	ing the names of andowner(s).  not limited to priving.  % Owner of the priving of	f individuals with vate corporations, ed ublicly Traded fit organizations)
Publicly-traded enti- ownership or financial Entitles include all bi- close corporations, for  isa Durette  This section is not real.  Are any individual	ties and non-pro interest. The discleusiness association reign corporations,  Full Name  required for public ual members, partn County Water Rec	ppearing before the Bo fit organizations she osure requirement, as as organized under or limited liability compar in the behavior of the behavior of the city-traded corporation ers, owners or principal lamation District full-tit	ard.  All list all Coapplied to land governed by Tailes, partnersh  Owner  Owner  Are you a als, involved in me employee( County emplo	rporate t-use ap fitle 7 or iips, limi public the bus s), or ap	o Officers as optications, experiments of the Nevada ited partners!  Title  Title  Ty-traded cosiness entity, oppointed/elector appointed.	nd Directors in lieu of ktends to the applicant of Revised Statutes, includings, and professional components of the professi	f disclos and the lading but or poration (if Corr. 100%)	ing the names of andowner(s).  not limited to priving.  % Owner of the priving of the properties of the priving of the priving of the properties of the priving of the priv	f individuals with vate corporations, ed ublicly Traded fit organizations)
Publicly-traded entiouvnership or financial Entitles include all biclose corporations, for the section is not reference to the	ties and non-proil interest. The discleusiness association reign corporations,  Full Name  required for public and members, partner County Water Recursion (County Water Recursion) (County Water Re	opearing before the Bo fit organizations sho osure requirement, as is organized under or limited liability companions of the behalf of the behalf of the ers, owners or principal damation District full-tief yes, please note that outracts, or other contracts, or other	ard.  All list all Co applied to land governed by Toles, partnershowner  Owner  Owner  County employ endicates, which an alls have a spetty. Department	public the bus s), or ap	Officers an opplications, experiments of the Nevada ited partners!  Title  Ity-traded co siness entity, opplicated/elect or appointed bject to compation, Clark Control of the compation, Clark Control opplication, Clark Control opplications of the control opplication of the control opplication of the control opplication of the control opplication of the control opplications of the control opplications of the control opplication opplication of the control opplication of the control opplication opplica	rporation? Yelected official(s) may retitive bid.)	f disclos and the le uding but orporatio  (i Corr 100%  es ment of A not perfor	ing the names of andowner(s).  not limited to priving.  % Ownins.  % Ownins.  Not required for Pupporations/Non-profes.  No Aviation, Clark Court any work on professor any work	f individuals with vate corporations, and ablicly Traded fit organizations) unty Detention of essional service
Publicly-traded entiownership or financial Entitles include all biclose corporations, for the section is not reference to the	ties and non-proil interest. The discleusiness association reign corporations,  Full Name  required for public and members, partner County Water Recursion (County Water Recursion) (County Water Re	opearing before the Bo fit organizations sho osure requirement, as is organized under or limited liability companions of the behalf of the behalf of the ers, owners or principal damation District full-tief yes, please note that outracts, or other contracts, or other	ard.  All list all Co applied to land governed by Toles, partnershowner  Owner  Owner  County employ endicates, which an alls have a spetty. Department	public the bus s), or ap	Officers an opplications, experiments of the Nevada ited partners!  Title  Ity-traded co siness entity, opplicated/elect or appointed bject to compation, Clark Control of the compation, Clark Control opplication, Clark Control opplications of the control opplication of the control opplication of the control opplication of the control opplication of the control opplications of the control opplications of the control opplication opplication of the control opplication of the control opplication opplica	rporation? Y  a Clark County, Depart ted official(s)?  Yelected official(s) may restrict partner, child, par	f disclos and the le uding but orporatio  (i Corr 100%  es ment of A not perfor	ing the names of andowner(s).  not limited to priving.  % Ownins.  % Ownins.  Not required for Pupporations/Non-profes.  No Aviation, Clark Court any work on professor any work	f individuals with vate corporations, and ablicly Traded fit organizations) and Detention of essional service
This section is not in the Yes  This section is not in Yes  2. Do any individual sister, grandchifull-time employ  Yes	ties and non-pro' I interest. The discle usiness association reign corporations,  Full Name  required for public ual members, partn. County Water Rec ual members, partn id, grandparent, re yee(s), or appointed	ppearing before the Bo fit organizations sha osure requirement, as as organized under or limited liability companions ers, owners or principal lamation District full-tit fyes, please note that ontracts, or other contracts, or	and.  All list all Co applied to land governed by T nies, partnersh  Owner  Owner  County employee( County employee( County employee( Lounty e	public the bus s), or ap yee(s), e not su suse, rere t of Avid	officers an optications, experimental optications, experimental optications, experimental optications of the Nevada decorrect	rporation?  a Clark County, Departed official(s)?  relected official(s) may retitive bid.)  restic partner, child, paracounty Detention Center  on Page 2. If no, plean	f disclos and the la ding but orporatio  (i Corr 100%  es  ment of / not perfor ent, in-lar r or Clark ase print l	ing the names of andowner(s).  not limited to priving.  % Owns.  % Owns.  Not required for Proporations/Non-profes.  No awaition, Clark Country work on priving any work on priving any work on prother/sister and country Water Research	f individuals with vate corporations, and ablicly Traded fit organizations) and Detention of the service that for the forest and the service that for the forest and the service that the servi
This section is not in the Yes  This section is not in Yes  2. Do any individual sister, grandchifull-time employ  Yes	ties and non-pro' I interest. The discle usiness association reign corporations,  Full Name  required for public ual members, partn. County Water Rec ual members, partn id, grandparent, re yee(s), or appointed	ppearing before the Bo fit organizations she osure requirement, as as organized under or limited liability companies as organized under or limited liability companies as organized under or limited liability companies as organized under organized as organized under organized types, please note that ortracts, or other contracts, or other contract	and.  All list all Co applied to land governed by Tailes, partnershowner.  Owner  Owner  Owner  County employacts, which an als have a spoty, Department the Disclosure wided herein is exchanges with	public the bus s), or ap yee(s), e not su suse, rere t of Avid	officers an optications, et if the Nevada ited partners!  Title  Title  Ty-traded co siness entity, pointed/elector appointed, bject to completed ation, Clark C ationship form t, completed a completed compl	rporation?  a Clark County, Departed official(s)?  relected official(s) may retitive bid.)  restic partner, child, paracounty Detention Center  on Page 2. If no, plean	f disclos and the la ding but orporatio  (i Corr 100%  es  ment of / not perfor ent, in-lar r or Clark ase print l	ing the names of andowner(s).  not limited to priving.  % Owns.  % Owns.  Not required for Proporations/Non-profes.  No awaition, Clark Country work on priving any work on priving any work on prother/sister and country Water Research	f individuals with vate corporations, and ablicly Traded fit organizations) and Detention of the service that for the forest and the service that for the forest and the service that the servi
This section is not in the Yes  This section is not in Yes  2. Do any individual sister, grandchifull-time employ  Yes	ties and non-pro' I interest. The discle usiness association reign corporations,  Full Name  required for public ual members, partn. County Water Rec ual members, partn id, grandparent, re yee(s), or appointed	ppearing before the Bo fit organizations she osure requirement, as as organized under or limited liability companies as organized under or limited liability companies as organized under or limited liability companies as organized under organized as organized under organized types, please note that ortracts, or other contracts, or other contract	and.  All list all Co applied to land governed by T nies, partnersh  Owner  Owner  Owner  County emplo acts, which an als have a spc ty, Departmer the Disclosure vided herein is exchanges with  Kenn	public the busy, or ap yee(s), e not su use, repet of Avia	officers an optications, et if the Nevada ited partners!  Title  Title  Ty-traded co siness entity, pointed/elector appointed, bject to completed ation, Clark C ationship form t, completed a completed compl	rporation?  a Clark County, Departed official(s)?  relected official(s) may retitive bid.)  restic partner, child, paracounty Detention Center  on Page 2. If no, plean	f disclos and the la ding but orporatio  (i Corr 100%  es  ment of / not perfor ent, in-lar r or Clark ase print la	ing the names of andowner(s).  not limited to priving.  % Owns.  % Owns.  Not required for Proporations/Non-profes.  No awaition, Clark Country work on priving any work on priving any work on prother/sister and country Water Research	f individuals with vate corporations, and ablicly Traded fit organizations) and Detention of the service that for the forest and the service that for the forest and the service that the servi

#### **Scott Clark**

From:

Kenneth Mckay <Drkenmckay@healthymindslv.com>

Sent:

Tuesday, January 19, 2021 2:59 PM

To:

Scott Clark

Subject:

Re: Amendment to contract 604858-18

Hello Scott,

Lisa A. Durette employs 49 total Clark county residents.

Thanks! Ken

From: Scott Clark <Scott.Clark@ClarkCountyNV.gov>

Date: Tuesday, January 19, 2021 at 1:42 PM

To: Kenneth Mckay < Drkenmckay@healthymindslv.com>

Subject: RE: Amendment to contract 604858-18

Ok. Thank you.

From: Kenneth Mckay < Drkenmckay@healthymindslv.com>

Sent: Tuesday, January 19, 2021 1:40 PM

To: Scott Clark < Scott.Clark@ClarkCountyNV.gov > Subject: Re: Amendment to contract 604858-18

Hello Scott,

I will have your question answered in 30 minutes. I just saw it within the last 15 minutes.

Thanks! Ken

From: Scott Clark < Scott. Clark@ClarkCountyNV.gov>

Date: Tuesday, January 19, 2021 at 12:56 PM

To: Kenneth Mckay < Drkenmckay@healthymindslv.com >

Subject: RE: Amendment to contract 604858-18

Hi Dr. McKay,

Could you please provide me the information below today. If not received I will miss taking this to the board on February 2 and have to wait till March 2. If you have any questions please feel free to reach out to me.

Scott Clark

Purchasing & Contracts 500 S. Grand Central Parkway, 4<sup>th</sup> floor Las Vegas, Nevada 89155

			IOOLOGOI	_	01 01111	LIVOI		/FIXINGIF ALC					
Business Entity	Type (Please sele	ct one	)	_									
Sole Proprietorship	Partnership		Limited Liability mpany		Corporation	Trus	st	Non-Profit Organization		Other			
Business Design	ation Group (Plea	se sel	ect all that apply)	)									
☐ MBE	□wbe		□SBE		PBE			□VET		DVET	ESB		
Minority Business Enterprise	Women-Owne Business Enterprise	d	Small Business Enterprise		Physically Ch Business Ent			Veteran Owned Business			Emerging Small Business		
										\$ (			
Number of C	lark County N	leva	da Residents	E	mployed:			16	×				
Corporate/Busin	ess Entity Name:	Cho	oices Group, LLC	LC									
(Include d.b.a., if	applicable)												
Street Address: 1785 E Sahara Ave. Ste. 160							We	ebsite: www.choicesla	svega	is.com			
City, State and Zip Code:								OC Name: Cindy Greer nail: cynthia.gree		thwavs.com			
Talambana Na	Telephone No: 702-252-8342							x No: 540-710-6447	. 6				
Telephone No:		102	202 00 12										
Nevada Local St		N/A	<b>\</b>				We	ebsite:					
City, State and Z	Zip Code:	Ü.					Lo	cal Fax No:					
							Lo	cal POC Name:					
Local Telephone	No:			Email:			nail:						
								Revised Statutes, includings, and professional corp	oration	ns	d		
Pathways Health	and Community S	uppor	t, LLC					(Not required for Publicly Traded Corporations/Non-profit organizations)  100% Direct					
This section is no	t required for publi	cly-tra	ded corporations.	Ar	e you a publicly	/-traded o	corp	oration? Yes	V	No			
	idual members, part irk County Water Re							Clark County, Departme d official(s)?	_	•	nty Detention		
Yes			olease note that Cors, or other contracts					lected official(s) may not titive bid.)	perfori	n any work on pro	fessional service		
sister, grando		elated	to a Clark County, I					stic partner, child, parent, unty Detention Center or					
Yes	✓ No (	lf yes, p	olease complete the	e Dis	sclosure of Relat	tionship fo	orm (	on Page 2. If no, please	print N	I/A on Page 2.)			
	alty of perjury, that al							d accurate. I also undersi closure form.	tand th	at the Board will n	ot take action on		
Cynthia Gr	er				Cindy Greer								
Signal Step 0985D4DE					Print Name								
CEO/State Direct	or			-	1/5/2021								
Title		==!	Date										

#### **Scott Clark**

From:

Nancy Poe <Nancy.Poe@pathways.com>

Sent:

Tuesday, January 19, 2021 12:43 PM

To:

Scott Clark

Subject:

**RE: Disclosures Form** 

Hello,

Please update the Disclosure form for Choices Group LLC- The Number of Clark County Nevada Residents Employed should be 16.

Thank you

Nancy Poe B.A.
Contract Administrator
Pathways of Arizona
1161 N EL Dorado Pl Suite 103
Tucson, AZ 85715
Ph: (520)570-1460
www.pathwaysofaz.com



#### **Important**

This email is confidential, intended only for the named recipient(s) and may contain information that is privileged or exempt from disclosure under applicable law. If you are not the intended recipient, you are notified that dissemination, distribution or copying of this message is strictly prohibited. If you receive this message in error, or are not the named recipient, please notify the sender at the email address above and delete this email from your computer. Thank You.

From: Scott Clark [mailto:Scott.Clark@ClarkCountyNV.gov]

Sent: Tuesday, January 19, 2021 1:04 PM
To: Nancy Poe <Nancy.Poe@pathways.com>

Subject: Disclosures Form

**CAUTION:** This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hi Nancy,

Just left you a message, if you have a moment today can you call me. I am going through final review on a couple amendments and the person approving the amendment had a couple questions about the disclosure forms.

		Dioono				// //					
Business Entity Typ	pe (Please select	one)						1			
Sole Proprietorship	Partnership	Limited Liab Company	ility [	Corporation	Trus	Non-Profit Organization		Other			
Business Designati	on Group (Pleas	e select all that a	apply)								
MBE	□WBE	SBE		☐ PBE		□VET		DVET	□ESB		
Minority Business Enterprise	Women-Owned Business Enterprise	Small Busi Enterprise		Physically Ch Business Ente		Veteran Owned Business		Disabled Veteran Owned Business  Emerging S Busines			
							_				
Number of Cla	rk County Ne	evada Reside	ada Residents Employed: 0								
Corporate/Business	s Entity Name:	Pathways Heal	thways Health and Community Support, LLC								
(Include d.b.a., if ap	pplicable)										
Street Address:		10304 Spotsylv	ania Av	enue, Ste. 300		Website: www.pathwa	ays.com				
Otrect Hadress.		Fredericksburg	VA 22	408		POC Name: Cindy Gr					
City, State and Zip	Code:	redeficitoring	, 77, 22	400				athways.com			
		540-710-6447				Email: cynthia.g		array 0.00m			
Telephone No:		340-7 10-0447				Fax No: 5-6-7 10-6-4	, 				
Nevada Local Stree		N/A				Website:					
	^					Local Fax No:					
City, State and Zip	Code:										
Local Telephone No	o:					ocal POC Name: Email:					
						da Revised Statutes, incl rships, and professional d	corporatio		d		
Pyramid Health Hold	lings, LLC		1 <u>2</u>				Corporations/Non-profit organizations) 100% Indirect				
			2				-				
			-								
This section is not re	equired for public	y-traded corporat	tions. A	re you a publicly	y-traded d	corporation? Y	'es ✓	No No			
	al members, partne County Water Recl					y, a Clark County, Depart ected official(s)?	ment of A	viation, Clark Cour	nty Detention		
Yes	No (If	yes, please note th ntracts, or other co	nat Count ntracts, v	ty employee(s), o which are not sub	r appointe ject to con	ed/elected official(s) may a mpetitive bid.)	not perfor	m any work on prof	essional service		
sister, grandchile	al members, partne d, grandparent, rel ee(s), or appointed	ated to a Clark Co	unty, De	ve a spouse, regi partment of Aviat	istered do tion, Clark	mestic partner, child, par County Detention Cente	ent, in-lav r or Clark	v or brother/sister, County Water Rec	half-brother/half- lamation District		
Yes	☑ No (If	yes, please comple	ete the D	isclosure of Relat	tionship fo	rm on Page 2. If no, plea	se print N	N/A on Page 2.)			
	certify under penalty of perjury, that all of the information provided herein is current, complete, and accurate. I also understand that the Board will not take action on and-use approvals, contract approvals, land sales, leases or exchanges without the completed disclosure form.  —DocuSigned by:										
Cynthia Gree	r			Cindy Greer							
Signal SpD9B5D4DE			=3,	Print Name							
CEO/State Director				1/5/2021							
Title			Date								

1

	VDI I I	,			7, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	_		
Business Entity Typ	oe (Please select			T				
Sole Proprietorship	Partnership	☑ Limited Liability Company	Corporation	Trust	Non-Profit Organization		Other	
Business Designati	on Group (Pleas	e select all that apply	)			_		T.
MBE	□WBE	SBE	PBE		VET		VET	ESB
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise	Physically Ch Business Ent		Veteran Owned Business	Disabled Veteran Owned Business  Business		
Number of Cla	rk County Ne	evada Residents	Employed:			0		
Corporate/Business	Entity Name:	Pyramid Health Hold	lings, LLC					
(Include d.b.a., if ap	plicable)							
Street Address: 10304 Spotsylvania Avenue, Ste. 300 Website: none								
Fredericksburg, VA 22408 POC Name: Joyce Montes								
City, State and Zip	Code:	, reading, true			mail: joyce mont		hwavs.com	
Talawhana Na		(540) 710-6085			ax No: <sup>540-710-6447</sup>			
Telephone No:		(5 10) 1 10 0000						
Nevada Local Stree		N/A		l v	/ebsite:			
(If different from ab					and Fau Na			
City, State and Zip	Code:				ocal Fax No:			
Local Telephone No	o:				ocal POC Name: mail:			
ownership or financial  Entities include all bu	interest. The disclossiness associations	sure requirement, as ap s organized under or go	plied to land-use ap verned by Title 7 of	plications, ex the Nevada	nd Directors in lieu of ktends to the applicant an Revised Statutes, includings, and professional con	nd the land ling but n	downer(s). ot limited to priva	
	Full Name			Title			% Owne ot required for Pu orations/Non-profi	blicly Traded
Cyrus Nikou Living T	rust					68.25		
Naxos Capital LLC						15		
BCK Capital, Inc.						9.75		
Diyamore Capital, In	C.					5		
This section is not re	equired for public	y-traded corporations.	Are you a public!	y-traded coi	poration? Yes	s 🗸	No	
		ers, owners or principals, amation District full-time			a Clark County, Departm ed official(s)?	ent of Avi	ation, Clark Cour	nty Detention
Yes		yes, please note that Co ntracts, or other contract			elected official(s) may no etitive bid.)	t perform	any work on pro	fessional service
sister, grandchile		ated to a Clark County,			estic partner, child, parer ounty Detention Center o			
Yes	✓ No (If	yes, please complete the	Disclosure of Rela	tionship form	on Page 2. If no, pleas	e print N//	A on Page 2.)	
	certify under penalty of perjury, that all of the information provided herein is current, complete, and accurate. I also understand that the Board will not take action on and-use approvals, contract approvals, land sales, leases or exchanges without the completed disclosure form.  —DocuSigned by:							
Joyce Montes	\$		Joyce Monte	S				
olymaidie			1/7/2021					
General Counsel								
Title			Date					

B	and Medical and a section of	2.1.281									
Business Entity Ty	pe (Please select										
Sole Proprietorship	Partnership	Limited L Company	iability	Corporation	✓ Trust	Non-Profit Organization		Other			
Business Designati	ion Group (Pleas	e select all the	at apply)	1		1_					
MBE	□WBE	SBE		PBE		VET		/ET	ESB		
Minority Business Enterprise	Women-Owned Business Enterprise	Small B Enterpr	usiness ise	Physically Ch Business Ent		Veteran Owned Business			Emerging Small Business		
Number of Cla	rk County Ne	evada Res	idents l	Employed:			0				
Corporate/Business	s Entity Name:	Cyrus Nikou	Living Tr	ring Trust							
(Include d.b.a., if ap	plicable)										
Street Address:	,	3750 Las Ve	gas Blvd	South	Ι,	Vebsite: none					
City, State and Zip	Code:	Las Vegas,	NV 89158	}	F	POC Name: Joyce Mon		awaye com			
		(540) 710-60	105			mail: Joyce.monto ax No:540-710-6447	-3@pati	iways.com			
Telephone No:		(340) 710-60	000		F	ax No; 340-7 10-0447					
Nevada Local Stree		N/A			V	Vebsite:					
(If different from ab						ocal Fax No:					
City, State and Zip	Code:										
Local Telephone No	0:			Local POC Name:							
	reign corporations,				ed partners	a Revised Statutes, includ hips, and professional cor			,		
Cyrus Nikou	Full Name		Tru	Title  Trustee			% Owned (Not required for Publicly Traded Corporations/Non-profit organizations) 100				
			_								
							_				
This section is not re											
This section is not required for publicly-traded corporations. Are you a publicly-traded corporation? Yes No  1. Are any individual members, partners, owners or principals, involved in the business entity, a Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District full-time employee(s), or appointed/elected official(s)?											
	al members, partne	ers, owners or p	rincipals, ir	nvolved in the busi	ness entity,	a Clark County, Departme			nty Detention		
	al members, partne County Water Recl	ers, owners or p amation District yes, please not	rincipals, ir full-time e e that Cour	nvolved in the busi	ness entity, pointed/elec	a Clark County, Departmented official(s)?	ent of Avi	ation, Clark Cour			
Center or Clark Yes  Do any individua sister, grandchili	al members, partne County Water Recl	ers, owners or p amation District yes, please not attracts, or other ers, owners or p ated to a Clark	rincipals, ir full-time en e that Cour contracts, rincipals ha County, De	nvolved in the busi mployee(s), or app nty employee(s), o which are not sub ave a spouse, regi	ness entity, pointed/elec r appointed ject to comp istered dom	a Clark County, Departmented official(s)?	ent of Avi	ation, Clark Cour any work on pro	fessional service		
Center or Clark Yes  Do any individua sister, grandchili	al members, partne County Water Recl No (If coi al members, partne d, grandparent, rel ee(s), or appointed	ers, owners or p amation District yes, please not- ntracts, or other ers, owners or p ated to a Clark (elected official)	rincipals, ir full-time er e that Cour contracts, rincipals ha County, Do s)?	nvolved in the busi mployee(s), or app nty employee(s), o which are not sub ave a spouse, regi epartment of Aviat	ness entity, pointed/elec r appointed, ject to comp istered dom tion, Clark C	a Clark County, Departmented official(s)?  felected official(s) may no obetitive bid.)  estic partner, child, paren	ent of Avional perform t, in-law of Clark C	ation, Clark Cour any work on protor or brother/sister, ounty Water Rec	fessional service		
Center or Clark Yes  2. Do any individua sister, grandchili full-time employed Yes  I certify under penalty land-use approvals, conducting the control of th	al members, partne County Water Recl  No (If coi al members, partne d, grandparent, rel ee(s), or appointed No (If of perjury, that all contract approvals, I	pers, owners or person of person of the informatic	rincipals, ir full-time er e that Cour contracts, rincipals ha County, Do s)? nplete the I	nvolved in the busi imployee(s), or app nty employee(s), o which are not sub ave a spouse, reg epartment of Avial Disclosure of Relat	ness entity, pointed/elec or appointed, ject to comp istered dom tion, Clark C	a Clark County, Departmented official(s)?  felected official(s) may note the partner, child, parent county Detention Center of the parent of t	ent of Avi	ation, Clark Cour any work on pro- or brother/sister, ounty Water Rec A on Page 2.)	fessional service half-brother/half- lamation District		
Center or Clark Yes  2. Do any individua sister, grandchil full-time employed Yes	al members, partne County Water Recl  No (If coi al members, partne d, grandparent, rel ee(s), or appointed No (If of perjury, that all contract approvals, I	pers, owners or person of person of the informatic	rincipals, ir full-time er e that Cour contracts, rincipals ha County, Do s)? nplete the I	nvolved in the busi imployee(s), or app nty employee(s), o which are not sub ave a spouse, reg epartment of Avial Disclosure of Relat	ness entity, pointed/elec ir appointed. ject to comp istered dom tion, Clark C tionship forr complete, a completed d	a Clark County, Departmented official(s)?  felected official(s) may note the partner, child, parent county Detention Center of the parent of t	ent of Avi	ation, Clark Cour any work on pro- or brother/sister, ounty Water Rec A on Page 2.)	fessional service half-brother/half- lamation District		
Center or Clark Yes  2. Do any individua sister, grandchili full-time employed Yes  I certify under penalty land-use approvals, conducting the control of th	al members, partne County Water Recl  No (If coi al members, partne d, grandparent, rel ee(s), or appointed No (If of perjury, that all contract approvals, I	pers, owners or person of person of the informatic	rincipals, ir full-time er e that Cour contracts, rincipals ha County, Do s)? nplete the I	nvolved in the busi imployee(s), or app nty employee(s), o which are not sub ave a spouse, regi epartment of Aviat Disclosure of Relat herein is current, inges without the o	ness entity, pointed/elec ir appointed. ject to comp istered dom tion, Clark C tionship forr complete, a completed d	a Clark County, Departmented official(s)?  felected official(s) may note the partner, child, parent county Detention Center of the parent of t	ent of Avi	ation, Clark Cour any work on pro- or brother/sister, ounty Water Rec A on Page 2.)	fessional service half-brother/half- lamation District		
Center or Clark Yes  2. Do any individua sister, grandchili full-time employed Yes  I certify under penalty land-use approvals, conducting the control of th	al members, partne County Water Recl  No (If coi al members, partne d, grandparent, rel ee(s), or appointed No (If of perjury, that all contract approvals, I	pers, owners or person of person of the informatic	rincipals, ir full-time er e that Cour contracts, rincipals ha County, Do s)? nplete the I	nvolved in the busi imployee(s), or app nty employee(s), o which are not sub ave a spouse, regi epartment of Aviat Disclosure of Relat herein is current, inges without the of	ness entity, pointed/elec ir appointed. ject to comp istered dom tion, Clark C tionship forr complete, a completed d	a Clark County, Departmented official(s)?  felected official(s) may note the partner, child, parent county Detention Center of the parent of t	ent of Avi	ation, Clark Cour any work on pro- or brother/sister, ounty Water Rec A on Page 2.)	fessional service half-brother/half- lamation District		

		DISCLOSU	KE OF	CAAIA	LKSH	IF/FRINCIFA	LS			
Business Entity Ty	pe (Please select	one)								
Sole Proprietorship	Partnership	Limited Liability Company	Corpo	ration	✓ Trust	Non-Profit Organization		Other		
Business Designati	ion Group (Pleas	e select all that appl	y)							
MBE	□WBE	□SBE	□PE	3E		□ VET		DVET	□ESB	
Minority Business Enterprise	Women-Owned Business Enterprise	Small Business Enterprise		cally Ch	allenged erprise	Veteran Owned Business			Emerging Small Business	
Number of Cla	rk County No	evada Resident	s Employ	yed:			0			
Corporate/Business	s Entity Name:	Cyrus Nikou Living	ng Trust							
(Include d.b.a., if ap	pplicable)									
Street Address:		3750 Las Vegas Bl	vd South		v	Vebsite: none				
City, State and Zip	Code:	Las Vegas, NV 891	58			OC Name: Joyce Me		ithways.com		
Telephone No:		(540) 710-6085				ax No:540-710-644		•		
		(,		_						
Nevada Local Stree		N/A			V	Vebsite:				
(If different from ab										
City, State and Zip	Code:				L	ocal Fax No:				
Local Telephone No	o:					ocal POC Name:				
					E	imail:				
ownership or financial  Entities include all bu	interest. The disclousiness association	it organizations shall sure requirement, as a sorganized under or glimited liability compani	pplied to land overned by T	d-use ap Title 7 of	plications, e the Nevada	xtends to the applicant Revised Statutes, inc	and the la luding but corporation	ndowner(s). not limited to priva	ate corporations, d blicly Traded	
This section is not re	equired for public	y-traded corporations	. Are you a	publicly	y-traded co.	rporation?	res ✓	No		
		ers, owners or principals amation District full-time					tment of A	viation, Clark Cou	nty Detention	
Yes		yes, please note that C ntracts, or other contrac					not perfor	m any work on pro	fessional service	
sister, grandchil		rs, owners or principals ated to a Clark County /elected official(s)?								
Yes	✓ No (If	yes, please complete th	ne Disclosure	e of Relat	tionship forn	n on Page 2. If no, ple	ase print N	I/A on Page 2.)		
I certify under penalty land-use approvals, conductions by:	of perjury, that all ontract approvals, I	of the information provious and sales, leases or ex	ded herein is changes with	current, nout the o	complete, a completed d	ind accurate. I also und isclosure form.	derstand th	nat the Board will n	ot take action on	
Joyce Montes	5		loves	Montes	2					
Signature			Print I		-					
1/7/2021										
General Counsel			Date							
THUE			Date							

		DIOOLOGE	TIL OI	J1111		III /I KINGII	ALU			
Business Entity Typ	e (Please select	one)								
Sole Proprietorship	Partnership	Limited Liability	Corp	ooration	Trus	t Non-Profit Organization	t	Other		
Business Designati	on Group (Pleas	e select all that ap	oly)							
□MBE	□WBE	SBE	□F	PBE		□VET		DVET	□ESB	
Minority Business Enterprise	Women-Owned Business Enterprise	Small Busine Enterprise	Physically Challenged Business Enterprise			Veteran Owne Business		Disabled Veteran Emerging Owned Business Busine		
Number of Cla	rk County Ne	evada Resider	its Emplo	oyed:			0			
Corporate/Business	Entity Name:	Naxos Capital LL	C							
(Include d.b.a., if ap										
Street Address:	,	4775 Collins Avei	nue, Apt. 38	304		Website: none				
City, State and Zip (	Code:	Miami Beach, FL	33140			POC Name: Joyce		athways.com		
		(540) 710-6085			-	Email: Joyce Fax No: 540-710-6		attiways.com		
Telephone No:		(340) 7 10-0003			_	Fax No:	7441			
Nevada Local Stree		N/A				Website:				
(If different from ab										
City, State and Zip	Code:					Local Fax No:				
Local Telephone No	<b>)</b> :						ocal POC Name: nail:			
Entities include all bu close corporations, for			nies, partners	ships, limit			nal corporatio		d blicly Traded	
Robert Lezec			Sole member							
		=								
	al members, partne	ly-traded corporation ers, owners or principal amation District full-ti	als, involved i	in the busi	iness entity	, a Clark County, De		No Aviation, Clark Cou	nty Detention	
Yes		yes, please note that ntracts, or other contr					nay not perfor	m any work on pro	fessional service	
sister, grandchild	d, grandparent, rel	ers, owners or principal lated to a Clark Count lelected official(s)?								
Yes	✓ No (If	yes, please complete	the Disclosu	re of Relat	tionship fo	m on Page 2. If no,	please print N	N/A on Page 2.)		
I certify under penalty land-use approvals, co DocuSigned by:							understand th	hat the Board will n	ot take action on	
Joyce Montes				e Montes	s					
General Counsel				t Name /2021						
			Date							

Busir	ness Entity T	pe (Please selec	t one	)								
Sc	-1-	Partnership		Limited Liability	V	Corporation	Trus	st	Non-Profit Organization		Other	
Busir	ness Designa	tion Group (Pleas	se sel	ect all that apply	)			_				
ПМ	BE	□WBE		SBE		PBE			☐ VET	DVET		□ESB
Minor Enter	rity Business prise	Women-Owned Business Enterprise	<b>d</b>	Small Business Enterprise		Physically Challenged Business Enterprise			Veteran Owned Business			Emerging Small Business
Nun	nber of Cl	ark County N	eva	da Residents	E	mploved:	_			0		
Corp	orate/Busine	ss Entity Name:	ВС	K Capital, Inc.								
20.7	ude d.b.a., if a											
	Street Address: 2285 Sherwood							We	ebsite: none			
	San Marino, CA								C Name: Joyce Monte	es		
City,	State and Zip	Code:						nail: joyce.monte:		thways.com		
Teler	Telephone No:							Fax	x No:			
	da Local Stre	ot Address:	Т					We	ebsite:			
2000	fferent from a		N/A	1				***	,boite.			
	, State and Zi							Lo	cal Fax No:			
Oity,	, otato ana Ei	<i>y</i> <b>0000</b> 1							cal POC Name:			
Loca	I Telephone I	lo:							nail:			
owner Entiti	rship or financia ies include all b	al interest. The disc ousiness association	losure ns org	requirement, as ap anized under or go	plie verr	d to land-use ap ned by Title 7 of	plications the Neva	, exte ida F	d Directors in lieu of dends to the applicant and Revised Statutes, includings, and professional corp	the la	andowner(s). not limited to priva	te corporations,
Stanle	ey Huang			s	Shareholder					Not required for Pul porations/Non-profit	olicly Traded	
This	section is not	required for public	:ly-tra	ded corporations.	Ar	e you a publicly	y-traded	corp	oration? Yes	<b>√</b>	] No	
				wners or principals, ion District full-time					Clark County, Department d official(s)?	nt of A	viation, Clark Cour	ty Detention
	Yes			please note that Co ts, or other contract					ected official(s) may not titive bid.)	perfor	m any work on prof	essional service
	sister, grandch		elated	to a Clark County,					stic partner, child, parent, unty Detention Center or			
	Yes	✓ No (I	f yes,	please complete the	e Di	sclosure of Rela	tionship fo	orm o	on Page 2. If no, please	print N	I/A on Page 2.)	
I certi	certify under penalty of perjury, that all of the information provided herein is current, complete, and accurate. I also understand that the Board will not take action on and-use approvals, contract approvals, land sales, leases or exchanges without the completed disclosure form.  — Docusigned by:											
Joy	a Monte	S				Joyce Montes	s					
Sight	ESSZA4BESS453.					Print Name						
Con	rol Coursel					1/7/2021						
Title	ral Counsel					Date						

		DISCEO	SUKE	OF OVVI	ГГИЗП	P/PRINCIPALS					
Business Entity Ty	pe (Please select	one)									
Sole Proprietorship	Partnership	Limited Lia	ability	Corporation	Trust	Non-Profit Organization		Other			
Business Designat	tion Group (Pleas	e select all tha	t apply)			-11					
МВЕ	□WBE	□SBE		PBE		□VET		VET	□E\$B		
Minority Business Enterprise	Women-Owned Business Enterprise	Small Bu Enterpris		Physically Ch Business Ente	allenged erprise	Veteran Owned Business			Emerging Small Business		
Number of Cla	ark County N	evada Resid	da Residents Employed:								
Corporate/Busines	e Entity Name:	Diyamore Ca	nore Capital, Inc.								
(Include d.b.a., if a	51										
	pplicable	5255 Cangas	Drive		v	Vebsite: none					
Street Address:		-				OC Name: Joyce Mont	es				
City, State and Zip	Code:	Calabasas, C	A 91301			mail: joyce.monte		thways.com			
Telephone No:						ax No:		•			
Nevada Local Stree	et Address:	N// 0			v	Vebsite:					
(If different from al	bove)	N/A									
City, State and Zip	Code:				L	ocal Fax No:					
Local Telephone N	lo:				ocal POC Name:						
Zodai rojopiloto t					E	mail:					
ownership or financia  Entities include all b	I interest. The disclousiness association	sure requirements organized under	it, as appli er or gove	ed to land-use ap rned by Title 7 of	plications, e the Nevada	nd Directors in lieu of o xtends to the applicant and Revised Statutes, includi hips, and professional corp	d the la	ndowner(s). not limited to priva	ate corporations,		
							Corp	lot required for Pu orations/Non-profi			
Vijay Mony			Sha	reholder		100					
			-								
				,							
	ual members, partne County Water Recl	ers, owners or pri amation District f yes, please note	ncipals, in ull-time en that Coun	volved in the busi nployee(s), or app	iness entity, pointed/elect or appointed/	a Clark County, Departmeted official(s)?	nt of A				
sister, grandchi		lated to a Clark 0	County, De			estic partner, child, parent County Detention Center or					
Yes	✓ No (If	yes, please com	plete the D	isclosure of Rela	tionship forn	n on Page 2. If no, please	print N	/A on Page 2.)			
	certify under penalty of perjury, that all of the information provided herein is current, complete, and accurate. I also understand that the Board will not take action on and-use approvals, contract approvals, land sales, leases or exchanges without the completed disclosure form.  -DocuSigned by:										
Joyce Montes				Joyce Montes	S	_					
3/g/16/16/20/4BE55453				Print Name 1/7/2021							
General Counsel											
Title				Date							